



Your business  
is our business.

REDACTED – FOR PUBLIC INSPECTION

7852 Walker Drive, Suite 200  
Greenbelt, Maryland 20770  
phone: 301-459-7590, fax: 301-577-5575  
internet: [www.jsitel.com](http://www.jsitel.com), e-mail: [jsi@jsitel.com](mailto:jsi@jsitel.com)

October 11, 2013

**By Hand Delivery**

Marlene H. Dortch, Secretary  
Federal Communications Commission  
Office of the Secretary  
445 12<sup>th</sup> Street, SW  
Washington, DC 20554

**Re: WC Docket No. 10-90, WC Docket No. 11-42  
2013 ETC Annual Report of Sunman Telecommunications Corp.  
Study Area Code 320825**

Dear Ms. Dortch:

On behalf of Sunman Telecommunications Corp. “Sunman”, JSI files the attached confidential and redacted versions of the FCC Form 481 ETC annual reporting information pursuant to sections 54.313 and 54.422 of the Commission’s rules.<sup>1</sup> Sunman seeks confidential treatment under Protective Order for section 54.313(f)(2) financial information.<sup>2</sup> The redacted version is also being filed this date via the FCC’s Electronic Comment Filing System.

Please direct any questions regarding the filing to the undersigned.

Sincerely,

John Kuykendall  
JSI Vice President  
301-459-7590  
[jkuykendall@jsitel.com](mailto:jkuykendall@jsitel.com)

cc: Charles Tyler, Telecommunications Access Policy Division (two copies, confidential)

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<sup>1</sup> 47 C.F.R. §§ 54.313, 54.422.

<sup>2</sup> *Connect America Fund et al.*, WC Docket No. 10-90 *et al.*, Protective Order, DA 12-1857 rel. Nov. 16, 2012 (Protective Order). 47 C.F.R. § 54.313(f)(2).

<b>FCC Form 481 - Carrier Annual Reporting</b> <b>Data Collection Form</b>	<b>FCC Form 481</b> <b>OMB Control No. 3060-0986/OMB Control No. 3060-0819</b> <b>July 2013</b>
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<010> Study Area Code	320825
<015> Study Area Name	SUNMAN TELECOMM CORP
<020> Program Year	2014
<030> Contact Name: Person USAC should contact with questions about this data	Mike Alig
<035> Contact Telephone Number: Number of the person identified in data line <030>	812-623-4957
<039> Contact Email Address: Email of the person identified in data line <030>	malig@ETC1.net

ANNUAL REPORTING FOR ALL CARRIERS	54.313 Completion Required	54.422 Completion Required
<100> Service Quality Improvement Reporting <span style="float: right;">(complete attached worksheet)</span>	<input type="checkbox"/>	<input type="checkbox"/>
<200> Outage Reporting (voice) <span style="float: right;">(complete attached worksheet)</span>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<210> <input checked="" type="checkbox"/> <-- check box if no outages to report		
<300> Unfulfilled Service Requests (voice) <span style="float: right;">(attach descriptive document)</span>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<310> Detail on Attempts (voice)	<input type="checkbox"/>	<input type="checkbox"/>
<320> Unfulfilled Service Requests (broadband)	<input type="checkbox"/>	<input type="checkbox"/>
<330> Detail on Attempts (broadband) <span style="float: right;">(attach descriptive document)</span>	<input type="checkbox"/>	<input type="checkbox"/>
<400> Number of Complaints per 1,000 customers (voice)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<410> Fixed <span style="float: right;">0.0</span>		
<420> Mobile		
<430> Number of Complaints per 1,000 customers (broadband)	<input type="checkbox"/>	<input type="checkbox"/>
<440> Fixed		
<450> Mobile		
<500> Service Quality Standards & Consumer Protection Rules Compliance <span style="float: right;">(check to indicate certification)</span>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<510> 320825in510 <span style="float: right;">(attached descriptive document)</span>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<600> Functionality in Emergency Situations <span style="float: right;">(check to indicate certification)</span>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<610> 320825in610 <span style="float: right;">(attached descriptive document)</span>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<700> Company Price Offerings (voice) <span style="float: right;">(complete attached worksheet)</span>	<input type="checkbox"/>	<input type="checkbox"/>
<710> Company Price Offerings (broadband) <span style="float: right;">(complete attached worksheet)</span>	<input type="checkbox"/>	<input type="checkbox"/>
<800> Operating Companies and Affiliates <span style="float: right;">(complete attached worksheet)</span>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<900> Tribal Land Offerings (Y/N)? <span style="float: right;">(if yes, complete attached worksheet)</span>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<1000> Voice Services Rate Comparability <span style="float: right;">(check to indicate certification)</span>	<input type="checkbox"/>	<input type="checkbox"/>
<1010> <span style="float: right;">(attach descriptive document)</span>	<input type="checkbox"/>	<input type="checkbox"/>
<1100> Terrestrial Backhaul (Y/N)? <span style="float: right;">(if not, check to indicate certification)</span>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<1110> <span style="float: right;">(complete attached worksheet)</span>	<input type="checkbox"/>	<input type="checkbox"/>
<1200> Terms and Condition for Lifeline Customers <span style="float: right;">(complete attached worksheet)</span>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

**Price Cap Carriers, Proceed to Price Cap Additional Documentation Worksheet**

Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers

<2000>	(check to indicate certification)	<input type="checkbox"/>
<2005>	(complete attached worksheet)	<input type="checkbox"/>

**Rate of Return Carriers, Proceed to ROR Additional Documentation Worksheet**

<3000>	(check to indicate certification)	<input checked="" type="checkbox"/>
<3005>	(complete attached worksheet)	<input checked="" type="checkbox"/>

**(100) Service Quality Improvement Reporting  
Data Collection Form**

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

<010>	Study Area Code	320825
<015>	Study Area Name	SUNMAN TELECOMM CORP
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Mike Alig
<035>	Contact Telephone Number - Number of person identified in data line <030>	812-623-4957
<039>	Contact Email Address - Email Address of person identified in data line <030>	malig@ETC1.net
<110>	Has your company received its ETC certification from the FCC?	(yes / no ) <input type="radio"/> <input checked="" type="radio"/>
<111>	If your answer to Line <110> is yes, do you have an existing §54.202(a) "5 year plan" filed with the FCC?	(yes / no ) <input type="radio"/> <input type="radio"/>

If your answer to Line <111> is yes, then you are required to file a progress report, on line <112> delineating the status of your company's existing § 54.202(a) "5 year plan" on file with the FCC, as it relates to your provision of voice telephony service.

<112> Attach Five-Year Service Quality Improvement Plan or, in subsequent years, your annual progress report filed pursuant to 47 C.F.R. § 54.313(a)(1). If your company is a CETC which only receives frozen support, your progress report is only required to address voice telephony service.

Name of Attached Document (.pdf)

Please check these boxes below to confirm that the attached PDF, on line 112, contains a progress report on its five-year service quality improvement plan pursuant to § 54.202(a). The information shall be submitted at the wire center level or census block as appropriate.

- <113> Maps detailing progress towards meeting plan targets
- <114> Report how much universal service (USF) support was received
- <115> How (USF) was used to improve service quality
- <116> How (USF) was used to improve service coverage
- <117> How (USF) was used to improve service capacity
- <118> Provide an explanation of network improvement targets not met in the prior calendar year.

<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

FCC Form 481  
OMB Control No. 3060-0986/OMB Control No. 3060-0819  
July 2013

[illegible]



<010>	Study Area Code	320825
<015>	Study Area Name	SUNMAN TELECOMM CORP
<020>	Program Year	2014
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<039>	Contact Email Address - Email Address of person identified in data line <030>	malig@ETC1.net

10/08/2013

FCC Form 481  
OMB Control No. 3060-0986/OMB Control No. 3060-0819  
July 2013

<010>	Study Area Code	320825
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<035>	Contact Telephone Number - Number of person identified in data line <030>	812-623-4957
<039>	Contact Email Address - Email Address of person identified in data line <030>	malig@ETC1.net
<810>	Reporting Carrier	Sunman Telecommunications Corp
<811>	Holding Company	Miles Enterprises, Inc.
<812>	Operating Company	Sunman Telecommunications Corp

[illegible]

<b>(900) Tribal Lands Reporting Data Collection Form</b>	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
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<010>	Study Area Code	320825
<015>	Study Area Name	SUNMAN TELECOMM CORP
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Mike Alig
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<039>	Contact Email Address - Email Address of person identified in data line <030>	malig@ETC1.net

<910> Tribal Land(s) on which ETC Serves

<920> Tribal Government Engagement Obligation

Name of Attached Document (.pdf)

If your company serves Tribal lands, please select (Yes,No, NA) for each these boxes to confirm the status described on the attached PDF, on line 920, demonstrates coordination with the Tribal government pursuant to § 54.313(a)(9) includes:

- <921> Needs assessment and deployment planning with a focus on Tribal community anchor institutions;
- <922> Feasibility and sustainability planning;
- <923> Marketing services in a culturally sensitive manner;
- <924> Compliance with Rights of way processes
- <925> Compliance with Land Use permitting requirements
- <926> Compliance with Facilities Siting rules
- <927> Compliance with Environmental Review processes
- <928> Compliance with Cultural Preservation review processes
- <929> Compliance with Tribal Business and Licensing requirements.

Select (Yes,No, NA)



**(1100) No Terrestrial Backhaul Reporting  
Data Collection Form**

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

<010>	Study Area Code	320825
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<039>	Contact Email Address - Email Address of person identified in data line <030>	malig@ETC1.net

<1120> Please check this box to confirm no terrestrial backhaul options exist within the supported area pursuant to § 54.313(G) ☐

<1130> Please check this box to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 kbps upstream within the supported area pursuant to § 54.313(G) ☐

<b>(1200) Terms and Condition for Lifeline Customers</b> <b>Lifeline</b> <b>Data Collection Form</b>	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
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<010>	Study Area Code	320825
<015>	Study Area Name	SUNMAN TELECOMM CORP
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Mike Alig
<035>	Contact Telephone Number - Number of person identified in data line <030>	812-623-4957
<039>	Contact Email Address - Email Address of person identified in data line <030>	malig@ETC1.net

<1210>	Terms & Conditions of Voice Telephony Lifeline Plans	320825in1210 Name of attached document (.pdf)
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<1220>	Link to Public Website	HTTP <a href="http://www.etczone.net/phonePlans.asp">http://www.etczone.net/phonePlans.asp</a>
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“Please check these boxes below to confirm that the attached PDF, on line 1210, or the website listed, on line 1220, contains the required information pursuant to § 54.422(a)(2) annual reporting for ETCs receiving low-income support, carriers must annually report:

<1221>	Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers,	<input checked="" type="checkbox"/>
<1222>	Details on the number of minutes provided as part of the plan,	<input checked="" type="checkbox"/>
<1223>	Additional charges for toll calls, and rates for each such plan.	<input checked="" type="checkbox"/>

**(2000) Price Cap Carrier Additional Documentation**

**Data Collection Form**

*Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers*

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

<010>	Study Area Code	320825
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<039>	Contact Email Address - Email Address of person identified in data line <030>	malig@ETC1.net

**CHECK the boxes below to note compliance as a recipient of Incremental Connect America Phase I support, frozen High Cost support, High Cost support to offset access charge reductions, and Connect America Phase II support as set forth in 47 CFR § 54.313(b),(c),(d),(e) the information reported on this form and in the documents attached below is accurate.**

**Incremental Connect America Phase I reporting**

- <2010> 2nd Year Certification {47 CFR § 54.313(b)(1)}
- <2011> 3rd Year Certification {47 CFR § 54.313(b)(2)}


**Price Cap Carrier Receiving Frozen Support Certification {47 CFR § 54.312(a)}**

- <2012> 2013 Frozen Support Certification
- <2013> 2014 Frozen Support Certification
- <2014> 2015 Frozen Support Certification
- <2015> 2016 and future Frozen Support Certification


**Price Cap Carrier Connect America ICC Support {47 CFR § 54.313(d)}**

- <2016> Certification Support Used to Build Broadband

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**Connect America Phase II Reporting {47 CFR § 54.313(e)}**

- <2017> 3rd year Broadband Service Certification
- <2018> 5th year Broadband Service Certification
- <2019> Interim Progress Certification
- <2020> Please check the box to confirm that the attached PDF , on line 2021, contains the required information pursuant to § 54.313 (e)(3)(ii), as a recipient of CAF Phase II support shall provide the number, names, and addresses of community anchor institutions to which began providing access to broadband service in the preceding calendar year.
- <2021> Interim Progress Community Anchor Institutions


Name of Attached Document Listing Required Information

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<b>(3000) Rate Of Return Carrier Additional Documentation</b>	FCC Form 481
<b>Data Collection Form</b>	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

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<020>	Program Year	2014
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<035>	Contact Telephone Number - Number of person identified in data line <030>	812-623-4957
<039>	Contact Email Address - Email Address of person identified in data line <030>	malig@ETC1.net

CHECK the boxes below to note compliance on its five year service quality plan (pursuant to 47 CFR § 54.202(a)) and, for privately held carriers, ensuring compliance with the financial reporting requirements set forth in 47 CFR § 54.313(f)(2). I further certify that the information reported on this form and in the documents attached below is accurate.

**Progress Report on 5 Year Plan**

(3010)	Milestone Certification {47 CFR § 54.313(f)(1)(i)} Please check this box to confirm that the attached PDF, on line 3012, contains the required information pursuant to § 54.313 (f)(1)(ii), as a recipient of CAF Phase II support shall provide the number, names, and addresses of community anchor institutions to which began providing access to broadband service in the preceding calendar year.	Name of Attached Document Listing Required Information	<input type="checkbox"/>
(3012)	Community Anchor Institutions {47 CFR § 54.313(f)(1)(ii)}	Name of Attached Document Listing Required Information	<input checked="" type="checkbox"/> (Yes/No)
(3013)	Is your company a Privately Held ROR Carrier {47 CFR § 54.313(f)(2)}		<input type="checkbox"/> (Yes/No)
(3014)	If yes, does your company file the RUS annual report Please check these boxes to confirm that the attached PDF, on line 3017, contains the required information pursuant to § 54.313(f)(2) compliance requires:		<input type="checkbox"/>
(3015)	Electronic copy of their annual RUS reports (Operating Report for Telecommunications Borrowers)		<input type="checkbox"/>
(3016)	PDF of Balance Sheet, Income Statement and Statement of Cash Flows		<input type="checkbox"/>
(3017)	If the response is yes on line 3014, attach your company's RUS annual report and all required documentation	Name of Attached Document Listing Required Information	<input checked="" type="checkbox"/> (Yes/No)
(3018)	If the response is no on line 3014, Is your company audited? If the response is yes on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains:		
(3019)	Either a copy of their audited financial statement; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications		<input checked="" type="checkbox"/>
(3020)	PDF of Balance Sheet, Income Statement and Statement of Cash Flows		<input checked="" type="checkbox"/>
(3021)	Management letter issued by the independent certified public accountant that performed the company's financial audit. If the response is no on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains: Copy of their financial statement which has been subject to review by an independent certified public accountant; or 2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers,		<input checked="" type="checkbox"/>
(3022)	Underlying information subjected to a review by an independent certified public accountant		<input type="checkbox"/>
(3023)	Underlying information subjected to an officer certification.		<input type="checkbox"/>
(3024)	Underlying information subjected to an officer certification.		<input type="checkbox"/>
(3025)	PDF of Balance Sheet, Income Statement and Statement of Cash Flows		<input type="checkbox"/>
(3026)	Attach the worksheet listing required information	Name of Attached Document Listing Required Information	320825in3026

<b>Certification - Reporting Carrier Data Collection Form</b>	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
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<010> Study Area Code	320825
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<035> Contact Telephone Number - Number of person identified in data line <030>	812-623-4957
<039> Contact Email Address - Email Address of person identified in data line <030>	malig@ETC1.net

**TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:**

<b>Certification of Officer as to the Accuracy of the Data Reported for the Annual Reporting for CAF or LI Recipients</b>	
I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual reporting requirements for universal service support recipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate.	
Name of Reporting Carrier:	
Signature of Authorized Officer:	Date
Printed name of Authorized Officer:	
Title or position of Authorized Officer:	
Telephone number of Authorized Officer:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	

<b>Certification - Agent / Carrier Data Collection Form</b>	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
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<010> Study Area Code	320825
<015> Study Area Name	SUNMAN TELECOMM CORP
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<035> Contact Telephone Number - Number of person identified in data line <030>	812-623-4957
<039> Contact Email Address - Email Address of person identified in data line <030>	malig@ETC1.net

**TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:**

<b>Certification of Officer to Authorize an Agent to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier</b>	
I certify that (Name of Agent) <u>John Staurulakis, Inc.</u> is authorized to submit the information reported on behalf of the reporting carrier. I also certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual data reporting requirements provided to the authorized agent; and, to the best of my knowledge, the reports and data provided to the authorized agent is accurate.	
Name of Authorized Agent:	John Staurulakis, Inc.
Name of Reporting Carrier:	SUNMAN TELECOMM CORP
Signature of Authorized Officer:	CERTIFIED ONLINE Date: 10/08/2013
Printed name of Authorized Officer:	Michael Alig
Title or position of Authorized Officer:	CFO
Telephone number of Authorized Officer:	812-623-2122
Study Area Code of Reporting Carrier:	320825 Filing Due Date for this form: 10/15/2013
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	

**TO BE COMPLETED BY THE AUTHORIZED AGENT:**

<b>Certification of Agent Authorized to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier</b>	
I, as agent for the reporting carrier, certify that I am authorized to submit the annual reports for universal service support recipients on behalf of the reporting carrier; I have provided the data reported herein based on data provided by the reporting carrier; and, to the best of my knowledge, the information reported herein is accurate.	
Name of Reporting Carrier:	SUNMAN TELECOMM CORP
Name of Authorized Agent or Employee of Agent:	John Staurulakis, Inc.
Signature of Authorized Agent or Employee of Agent:	CERTIFIED ONLINE Date: 10/08/2013
Printed name of Authorized Agent or Employee of Agent:	Alice Lewis
Title or position of Authorized Agent or Employee of Agent:	Manager
Telephone number of Authorized Agent or Employee of Agent:	217-498-6863
Study Area Code of Reporting Carrier:	320825 Filing Due Date for this form: 10/15/2013
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	

## Attachments

**Sunman Telecommunications Corp demonstration of complying with applicable service quality standards and consumer protection rules:**

In establishing this certification in its *2005 ETC Order*,<sup>1</sup> the FCC found that an ETC must make “a specific commitment to objective measures to protect consumers.”<sup>2</sup> The Commission found that for wireless ETCs, compliance with CTIA’s Consumer Code for Wireless Service would satisfy this requirement” and that the sufficiency of other commitments would be considered on a case-by-case basis.<sup>3</sup> In this context, the FCC stated, “to the extent a wireline or wireless ETC applicant is subject to consumer protection obligations under state law, compliance with such laws may meet our requirement.”<sup>4</sup>

**Sunman Telecommunications Corp** (“Company”) hereby certifies that it is complying with applicable service quality standards and consumer protection rules. The Company is subject to consumer protection obligations under the Indiana Code (IC) and Indiana Administrative Code (IAC). These obligations include, but are not limited to, the following: (1) adherence to Indiana state consumer protection requirements governing telephone providers which include Quality of Service rules as identified in IC 8-1-17.5-24, and Compliance with Anti-Slamming and Anti-Cramming Procedures as adopted in IC 8-1-29-5, Rule 1.1 170 IAC 7-1.3-8.1; (2) truth-in-billing requirements as required in

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<sup>1</sup> *Federal-State Joint Board on Universal Service*, CC Docket No. 96-45, Report and Order, FCC 05-46 (rel. Mar. 17, 2005) (“*2005 ETC Order*”).

<sup>2</sup> *Id.* at para. 28.

<sup>3</sup> *Id.* The FCC noted that under the CTIA Consumer Code, wireless carriers agree to: “(1) disclose rates and terms of service to customers; (2) make available maps showing where service is generally available; (3) provide contract terms to customers and confirm changes in service; (4) allow a trial period for new service; (5) provide specific disclosures in advertising; (6) separately identify carrier charges from taxes on billing statements; (7) provide customers the right to terminate service for changes to contract terms; (8) provide ready access to customer service; (9) promptly respond to consumer inquiries and complaints received from government agencies; and (10) abide by policies for protection of consumer privacy.” *Id.* at n. 71.

<sup>4</sup> *Id.* at n. 72.



Rule 1.3 170 IAC 7-1.3-6; and (3) CPNI, Red Flag Rules and other applicable federal and state requirements governing the protection of customers' privacy.

**Sunman Telecommunications Corp demonstration of ability to function in emergency situations:**

**Sunman Telecommunications Corp** (“Company”) hereby certifies that it is able to function in emergency situations as set forth in the Code of Federal Regulations, Title 47, Part 54, Subpart C, §54.202(a)(2)<sup>1</sup> and Rule 1.2, 170 IAC 7-1.2-18 of the Indiana Administrative Code. The Company’s network is designed to remain functional in emergency situations without an external power source, is able to reroute traffic around damaged facilities, and is capable of managing traffic spikes resulting from emergency situations as required by Section 54.202(a)(2). The Company can change call routing translations as needed to reroute traffic around damaged facilities. Changing call routing translations will also allow the Company to manage traffic spikes throughout its network, as emergency situations require.

Specifically, each central office building is supplied with standby generators and battery back-up that enable the central office to keep running until power is restored so long as fuel is available, or until system changes are made to reroute traffic. In accordance, and compliance, with Rule 1.2, 170 IAC 7-1.2-18, all switching offices or equivalent with installed emergency power generating equipment have a minimum of three (3) hours battery capacity; switching offices or equivalent without installed

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<sup>1</sup> Section 54.202(a)(2) requires ETCs that are designated by the Commission to “demonstrate its ability to remain functional in emergency situations, including a demonstration that it has a reasonable amount of back-up power to ensure functionality without an external power source, is able to reroute traffic around damaged facilities, and is capable of managing traffic spikes resulting from emergency situations.”

emergency power generating equipment have a minimum battery capacity of five (5) hours.



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[HOME](#)   [RESIDENTIAL SERVICES](#)   [BUSINESS SERVICES](#)   [WIRELESS](#)   [CONTACT US](#)



[Local Phone](#)   [Rates & Features](#)   [Calling Features Guide](#)   [Long Distance](#)

SUNMAN

Phone Number Prefix: 623, 576, 852  
Serving Sunman, St. Leon and Napoleon

Change Location

Local Telephone Rates (Single Line)

Pay one flat rate each month, excluding taxes, calling features and long distance charges. 911, TDD and Network Access fees apply.

Type	Monthly Rate
Residential	\$12.95
Vacation	Call for Details
Lifeline Support <i>(Get Details)</i>	Contact ETC for details

Effective July 1, 2013 the Access Recovery Charge will be \$1.00 for residential customers and single-line businesses. The Access Recovery Charge will be \$2.00 for multi-line businesses. The Access Recovery Charge (ARC) is a monthly charge approved by the FCC and assessed by local telephone companies to recover some of the costs incurred in the provision and maintenance of telephone service. Even though this charge appears on your local bill, it is governed by the FCC.

Service Information Requirements

- Complete address where service is to be installed.
- Billing address, if it is different than the physical address.
- Information about previous phone service.
- Proof of identification.
- Employment information.

Calling Features Available

More information and pricing is available by selecting each feature or download a [printable PDF](#).

Call Waiting	Call Transfer	Reminder Calls
Call Forwarding	Call Forwarding No Answer	Call Forwarding Busy
Caller ID	Distinctive Ring	Privacy Call Block
Caller ID Blocking	Distinctive Ringing Line	Selective Call Forwarding
Caller ID Unblocking	Call Acceptance	Voice Mail
Call Return	Selective Call Rejection	Roll Down
Repeat Dialing	Toll Control	Speed Dialing
3-Way Calling	Customer Originated Trace**	Call Blocking/Barring
3-Way Calling (Allow Transfer)		

\*Due to varying availability of technology, prices vary upon location.  
\*\*Not available in the \$9.95 Pick Any Five Calling Feature Pack.

BUNDLE  
AND  
SAVE!

  
+

  
+



Bundle ETC's Unlimited Long Distance  
with any other two services for one  
low, monthly rate!

PICK A BUNDLE. SAVE A BUNDLE.



Local Telephone, Cable TV/Video, High Speed Internet

YOUpick3

\$79.95/mo.

Save approximately 20%

http://www.etczone.com/phonePlans.asp[10/3/2013 1:21:37 PM]

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With ETC's **YOUpick** bundles, you decide which services are right for you.

- |                           |                        |                            |                      |                      |
|---------------------------|------------------------|----------------------------|----------------------|----------------------|
| About ETC                 | Community Channel      | ETC Hotspots               | Pay My Bill Online   | Sitemap              |
| Billing & Payment         | Community Involvement  | ETC-TV                     | Refer A Friend       | Spotlight Newsletter |
| Business Phone Systems    | CPNI Rules             | Frequently Asked Questions | Regulatory Policies  | Tech Team            |
| Business Bundles          | Current Deals          | Installation & Upgrades    | Residential Bundles  | Technical Support    |
| Call Before You Dig       | Direct Debit           | Liberty Package Plans      | Scam Alerts          | Web Design & Hosting |
| Careers                   | Enhanced PC Protection | Lifestyle Support          | Scholarships         |                      |
| Check Cellular Minutes    | ESPN 3                 | MyGroup Instructions       | Security Systems     |                      |
| Closed Captioning Contact | ETC History            | Paperless Billing Sign Up  | Service Availability |                      |

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Serving Sunman, St. Leon and Napoleon

### Local Telephone Rates (Single Line)

Pay one flat rate each month, excluding taxes, calling features and long distance charges. 911, TDD and Network Access fees apply.

Type	Monthly Rate
Residential	\$12.95
Vacation	Call for Details
Lifeline Support <i>(Get Details)</i>	Contact ETC for details

Effective July 1, 2013 the Access Recovery Charge will be \$2.00 for FCC and assessed by local telephone service. Even though this charge is

Enhanced Telecommunications Corporation participates in the Lifeline federal assistance program to help eligible Hoosiers get local telephone service and help them make their monthly payments. You may qualify for this program if you take part in at least one of these assistance programs:

- Low Income Home Energy Assistance Program (LIHEAP)
- Federal Public Housing Assistance (Including Sec 8)
- Medicaid
- Food Stamps
- Supplemental Security Income (SSI)
- National School Lunch program (NSL)
- Temporary Assistance of Needy Families (TANF)

Additional details:

- Household income must be no more than 135% of the Federal Poverty Guidelines.
- Lifeline is non-transferable and only one discount is available per household.
- Each year, Lifeline customers must certify that they are still eligible for the discount.
- Customers must enroll in Lifeline service and must provide proof of eligibility before receiving support.
- Customers who willfully make false statements in order to obtain the benefit are subject to fine or imprisonment or may be barred from the program.

For additional information contact your local telephone office.

May not be available at all locations.

\*Due to varying availability of features  
\*\*Not available in the \$9.95 Pick

### CURRENT RESIDENTS

Keep Your  
Phone  
Number  
When You  
Switch!



PICK ANY  
**FIVE**  
CALLING FEATURES  
**\$9.95** per month

ETC offers a variety of calling features to enhance the productivity of your home telephone. Following is a list of each calling feature and a description of how it works along with the monthly cost.

Select calling features can be used on a per usage basis with a charge of \$0.75 per use with a max charge of \$5.00 /month per feature. For a complete list of those features, contact ETC at 1-866-ETC-4YOU.

**PICK A BUNDLE. SAVE A BUNDLE.**

Local Telephone, Cable TV/Video, High Speed Internet

**REDACTED – FOR PUBLIC INSPECTION**

**SUNMAN TELECOMMUNICATIONS CORP. (SAC 320825)**

**ATTACHMENT - LINE 3017**

**ATTACHMENT REDACTED IN ENTIRETY**